

CALWORKS RFP
ADDITIONAL QUESTIONS AND ANSWERS (Q & A)*
Proposers Conference
October 5, 2010

MINIMUM MANDATORY REQUIREMENTS

1. **Having two medical detox providers abdicates the County's authority to select service providers – those two med detox providers instead acquire the power to anoint which providers they choose to work with. Please eliminate the med detox requirement from consortium modalities and contract those services directly so as to open real competition for the other service modalities.**

Residential medical detoxification is part of the currently provided CalWORKs services and SAPC has not experienced any of the problems described. The arrangement requested under the RFP will remain unchanged. To avoid the occurrence of any problems, SAPC will be monitoring the services provided by the two residential medical detoxification providers throughout the agreement term.

2. **So this means any CalWORKs participant who needs residential medical detox is limited to the two sites currently offering that service? According to the October 5 Q&A handout, it appears that all the residential medical detox treatment was handled in SPA 2. Is that correct? Even if the CalWORKs participant is in Pomona, s/he has to go to SPA 2? Or did all the reported CalWORKs participants who availed of residential medical detox reside in SPA 2?**

The handout shows the services that were provided to CalWORKs participants and billed to SAPC in Fiscal Year 2009-10. At that time, SAPC had only one contracted agency providing residential medical detoxification to CalWORKs participants. That agency is in SPA 2, and it was caring for any CalWORKs participant who needed that service. And yes, these CalWORKs participants come from all over the County and some do travel from Pomona to SPA 2.

3. **If there are only three agencies in LA County that provide med detox services, how are agencies expected to partner in a consortium, as a lead or as subcontractor? Since these agencies also provide other treatment types, are they willing or do they understand the importance of partnering?**

There are currently only two, and not three, agencies in the County that provide residential medical detoxification services. Both agencies have indicated to SAPC their willingness to be part of the residential medical detoxification component of any consortium's response to the RFP.

4. **Why is CalWORKs not contracting the 3 med detox facilities and having them subcontract?**

Allowing consortiums to subcontract with the two residential medical detoxification service providers, instead of the residential medical detoxification providers subcontracting with the consortiums, provides for a greater number of consortiums to be formed. The RFP seeks to make this contracting opportunity available to as many qualified providers as possible, thus the recommendation for consortiums to approach the two residential medical detoxification providers.

5. **Why aren't non-medical detox services being considered in this RFP? As it stands now, only three agencies in LA County offer medical detox.**

* Questions asked and answered (in addition to the Q&A Handout) at the CalWORKs RFP Proposers Conference on October 5, 2010.

SAPC's current CalWORKs agreement with DPSS requires the provision of residential medical detoxification services. This RFP seeks to re-solicit proposals for the services covered by this agreement.

- 6. Does the detox provider need to have experience with CalWORKs clients? Detox is based on drug addiction, not a funding source or demographic.**

Yes, the residential medical detoxification provider who will provide services under this RFP must have at least four years experience with CalWORKs clients. This RFP will result in DPSS CalWORKs-funded agreements and is therefore focused on selecting providers with experience in providing services to CalWORKs WtW participants.

- 7. Our agency has many years of experience in providing detox services to CalWORKs participants. However, we are not paid via a CalWORKs contract. Does this meet the experience requirement?**

Please include in your proposal, clear documentation of your experience in providing detoxification services to CalWORKs participants. Your documentation must show that your agency has at least four (4) years of experience in providing residential medical detoxification services to CalWORKs participants.

- 8. If you have provided services to CalWORKs eligible people, does that meet the 4-year requirement?**

The services provided to CalWORKs eligible people must cover a period of at least four years. Further, these services should be any of the following: day care habilitative, outpatient counseling, residential treatment, and I medical residential detoxification) services.

- 9. If an agency does not have prior CalWORKs experience, will they be considered?**

No, an agency without prior CalWORKs experience cannot be considered.

- 10. If I currently do not have a CalWORKs contract, however I have served CalWORKs referrals under another contract, does this qualify as (appropriate) experience?**

The services provided to CalWORKs referrals must have been for a period of at least four years, and the services must be on one or more of the four services sought under this RFP. All these should be sufficiently documented and included in the proposal.

- 11. Can a nonprofit agency who does not have a CalWORKs ADP licensed 35-bed facility be part of a consortium?'**

Yes, a nonprofit agency that does not have a CalWORKs ADP licensed 35-bed facility can be part of a consortium, provided the consortium accepts the agency. SAPC leaves it up to the consortium lead agency and/or members to determine whether such an agency will strengthen or weaken their proposal.

- 12. There is also a question regarding Domestic Violence contract, Habilitative Day Care with DPSS. Is this okay?**

The question is, can Domestic Violence (DV) Day Care Habilitative (DCH) qualify as DCH experience for this RFP. The answer is yes, four years experience as a Domestic Violence DCH contractor with DPSS will be the same as four years experience as a DCH provider.

- 13. Is ARF or JCAHO accreditation alone enough to qualify for detox?**

Although a provider can possess ARF or JCAHO accreditation, these certifications/accreditations alone are not enough to qualify as a residential medical detoxification services provider under this RFP. Residential medical detox agencies should currently carry the following licenses/certifications:

- State Department of Alcohol and Drug Programs certification
- State Department of Public Health license
- State Department of Consumer Affairs Pharmacy permit
- Narcotic treatment programs require DEA license

These are all in addition to required city licenses and permits.

- 14. There are hospitals that are JCAHO certified – do they qualify under this RFP?**

See response to #13 above.

- 15. Can the provider of residential medical detox services be accredited by the Joint Commission (TJC formerly known as the Joint Commission on Accreditation of Health Care Organizations or JCAHO) instead of certified and licensed by the State ADP? (See RFP Narrative, p. 4, item #4).**

See response to #13 above.

- 16. There is no SDADP licensed “medical” residential detox. What specifically is going to be accepted?**

See response to #13 above.

- 17. There is no State certification for Day Care Habilitative (DCH) services. Licensed residential or certified outpatient or licensed non medical detox - those are the only three options.**

Under Drug Medi-Cal, there is a special certification. Some Drug Medi-Cal programs are serving CalWORKs participants and they are a larger part of the Drug Medi-Cal system. Agencies may participate in this process if they show documentation that they have been serving CalWORKs participants. They will qualify for this process. Certified outpatient programs willing to increase their intensity may provide services.

- 18. DCH is currently severely limited in geographic availability under standing contracts for CalWORKs service. Day Care is a form of outpatient and therefore must be geographically convenient for clients to access, to be expected to successfully attend. To give all CalWORKs recipients good access to day care services, will SAPC allow outpatient providers to extend programs to day care if one consortium partner has experience providing it already?**

DCH is a form of outpatient counseling service. An agency may have been providing outpatient counseling for four years, but not specifically DCH outpatient counseling. The RFP requires an agency to have at least *4 years prior experience in DCH* for it to qualify as a provider of DCH services. But SAPC feels there is enough similarity between these two services that if an outpatient services agency can provide documentation that it has been providing outpatient services to CalWORKs participants, the agency can easily expand to provide DCH services. The same would be true for an agency that has a history of providing DCH services, and expands to provide outpatient counseling under this RFP.

- 19. If the answer to the above question is yes, an outpatient service provider with no DCH history can expand its outpatient program to include DCH services, then how this does meet the 4-year requirement?**

Both DCH and Outpatient Counseling are nonresidential treatment modalities. SAPC will accept four years of experience in either modality as meeting the required experience for nonresidential treatment. In terms of documenting this experience, both modalities may be certified by the State. However, State certification is not required for existing CalWORKs contractors. SAPC considers State Certification as a further indication of a stronger program model.

- 20. Is State certification needed (to provide DCH services)?**

Yes, State certification is needed to provide DCH services. The RFP states that agencies must have the necessary, appropriate licenses and certifications to provide the four services to CalWORKs participants.

- 21. DCH services are currently under-represented in certain geographical areas. Must each SPA provide access to DCH services for its participants?**

Yes, all the four required services (day care habilitative, outpatient counseling, residential medical detox, and residential treatment) must be made available to CalWORKs participants in each SPA.

- 22. We have certification to provide DCH but it's funded by DPSS now. Is this experience viable in that category? (Not funded by SAPC currently).**

This would be viable only if the experience is with providing services to CalWORKs WtW participants over a period of at least four years. It is also preferred but not necessary that these services were provided under a SAPC-funded contract. For services provided under another contract (not SAPC), the proposal should include detailed information on the type of contract used.

- 23. We do not have certification from ADP to provide DCH but we have been providing it for more than four years. We are applying for ADP certification. Are we qualified?**

Agencies must provide documentation to support the services they provided. DCH services are normally certified by Drug Medi-Cal. Agencies must provide clear documentation to support their experience or copies of ADP certification prior to the awarding of the contract, estimated at late May 2011.

- 24. Given the length of time it takes to receive certification it is unlikely we will be certified by the contract award date. When/how often do you anticipate repeating the RFP process?**

The re-release for this particular RFP can be as early as in three years' time, when the term and funding for the current RFP will expire. However, DPH usually releases RFPs every five to seven years on average.

- 25. Can a non-lead agency, who has not had a CalWORKs contract but is an ADP licensed and certified residential facility, be part of a consortium?**

No, one must have prior CalWORKs experience.

- 26. If agencies do not have prior "CalWORKs" experience but have all the modalities covered, will they be considered?**

No, these agencies must have served CalWORKs participants.

- 27. If you have provided services to CalWORKs-eligible people, does that meet the four-year requirement for experience?**

Yes, if you provided services to this population for at least four years.

- 28. Could you please clarify the answers to questions 7 and 8 (page 12 of the October 5 Q&A handout)? They appear to contradict each other. In Question 7, what you're saying is that one is not to provide all four services within a single SPA, and then question 8 states you can apply in different SPAs with a single proposal.**

If the question is "*Are the agencies restricted to a SPA?*", then the answer is no, an agency is not restricted to a SPA. The proposal should indicate to SAPC if the proposer is serving just one area or SPA or multiple areas or SPAs.

- 29. Is "area" synonymous with SPA?**

"Area" is not necessarily synonymous with "SPA". It depends on how the proposer configures things. In the example above, there may be 2 consortia who will say, this is a huge area so we will flip a coin and split the area. It will be up to the proposers to let SAPC know what the proposers intend to do. There may be 2 consortia if the area is big.

PROGRAM CONCERNS

- 1. When you say DCH, do you mean for adults and youth? So that both services will be for provided to family and youth?**

The RFP is specific about the population to be served.

2. **We think the main goal of the RFP is to assist adults with overcoming substance abuse and related problems. To what extent can this RFP adjust to their children's needs? Are there any restrictions on assisting their children?**

Typically, in the CalWORKs treatment continuum over the years, SAPC has allowed individuals to go into treatment together with their children whenever the programs can accommodate them. A similar question was asked and answered in the October 5, 2010 Q&A handout. Please see question #10 on page 6 of the October 5 Q&A handout.

3. **Clarification on Day Care- are you looking for a treatment modality or a State certification? Which one is it?**

Day Care Habilitative (DCH) is a treatment modality and it is the type of intensive treatment services that some CalWORKs participants need, particularly those who have come out of residential treatment. So in terms of the four services SAPC wants to have available, SAPC wants to have DCH which is an intensive outpatient treatment modality, available to CalWORKs participants.

4. **DCH is a form of outpatient and needs to be accessible to be attended. Current DCH to CalWORKs is NOT sufficient to make them available to all. So that they can become available to all, if one consortium member has day care experience, can the other consortium members provide day care in addition to the outpatient they have provided?**

The consortium lead agency and members should decide who provides what services within the consortium. SAPC is not limiting this in any way.

5. **Can UCLA ISAP be sure to include all evidence-based practices as defined by NIDA and SAMHSA in their trainings?**

Examples of evidence-based practices are Cognitive Behavioral Therapy (CBT) and Motivational Interviewing (MI). SAPC, in partnership with UCLA ISAP, regularly conducts trainings on these and other evidence-based practices. Interested providers may inquire about these trainings from SAPC staff and/or access the SAPC website for updates.

6. **Please give some examples of optional "evidence based practices". Is Medication Assisted Therapy (MAT) plus our regular groups enough?**

Yes, MAT is an evidence based practice. Please refer to #5 above for other examples.

7. **Will ISAP/SAPC trainings be announced in the Addendum?**

Training session schedules are announced widely to SAPC's agencies. All agencies are encouraged to regularly check the SAPC website for postings on these trainings.

8. **The RFP states that Proposers should be prepared to use the ASI and that CASCs will also use the ASI for assessment. Please clarify how the ASI/assessment is expected to be used so that overlap and over-administration of measures can be avoided.**

Exhibit II of the RFP addresses the use of ASI.

CONTRACT CONCERNS

1. **Has anything changed criteria-wise, other than the fundamental requirements in this RFP? Have there been any changes in the criteria for selection this time around?**

This is the first time that CalWORKs services are re-solicited through a Request for Proposals (RFP) process. There are no past criteria with which to compare this RFP. However, the majority of criteria or requirements under the current contracts have not changed including the types of services to be provided. The only changes have been to recommend the forming of consortiums and to require that a consortium's lead agency be responsible for the contract as a whole, including being responsible for all of its consortium members (e.g., ensuring that they all have proper insurance coverage, case management, etc.).

2. **Page 17 (3) "Proposer's Expertise..." refers to "demonstrated expertise". Is this the same as the required 4 years of experience in a modality? Can an agency "demonstrate expertise" in a modality without meeting the 4-year threshold of serving CalWORKs WtW participants?**

No, a proposer must have at least four years experience in the services it proposes to provide. "Demonstrating expertise" as written on Page 17 basically means that proposers, having determined that they meet the minimum requirements to participate under this RFP, must now provide a written description that proves/demonstrates they have four years experience in the service(s) they will provide.

3. **The Response to Question # 13 on page 4 of the October 5 Q&A appears to be talking about two (2) documents that will prove an organization is in good standing with the County – a letter and CAP documentation. Who signs the letter- all four (4) partners? Also, do you accept electronic signatures?**

The lead agency and all consortium members need to sign the letter, to confirm that they are all in good standing. All signatures must be in hard copy since the RFP is submitted as a hard copy. SAPC is not accepting electronic signatures. If any of the consortium members were required to do a CAP the member should describe that CAP and its outcome, so evaluators can determine if the CAP was minor issue or at a level to affect provider's good standing as a reliable contract provider.

4. **How many partners can be under a lead agency? If the maximum is four, then how can providers serve youth needing services, other than DCH?**

This limitation has been lifted. There will be no limit to the number of partners a lead agency can have. The population to be served is specified in the RFP and does not include youth...

5. **For a collaborative partnership, do you require a letter of intent to collaborate or is a MOU (Memorandum of Understanding) sufficient?**

SAPC will accept either document. However, SAPC believes a letter of intent signed by the lead agency and all consortium members is easier to obtain. But if the proposer already has signed subcontracts or MOU, these are acceptable too, since signed subcontracts or MOUs must be eventually entered into by all consortium members with the lead agency before any contract is awarded by County.

6. **If two proposers agree to split service areas in a SPA based on geography, is that "collusion" and therefore prohibited?**

No, this is not considered "collusion".

7. **Do all the agencies forming the consortium need to be located in the same SPA?**

No, the agencies forming a consortium do not have to be located in the same SPA.

8. **Can one application by a single lead agency propose services in multiple SPAs? Is a separate application required for each SPA?**

Yes, a single lead agency can propose to provide services in multiple SPAs under one application or under one RFP proposal response. However, the agency should ensure that their proposal response clearly identifies what services will be provided in what SPA. .

9. **What if a client does not like the partners that the lead agency has partnered up with, what happens to the client and the follow-up? Who is now responsible for the client with this type of funding?**

SAPC trusts that the consortium's lead agency would be able to resolve the situation, based on how best to meet the needs of the client. However, if the lead agency is unable to resolve the situation, the client should be referred back to the CASC.

10. **Mr. Izumi said they are seeking WOMEN-OWNED and MINORITY BUSINESSES. The RFP allows only NONPROFIT CORPORATIONS.**

Yes, the CalWORKs RFP is for non-profit organizations only. The intent of the statement was to highlight the general purpose of RFPs which is to open up the contracting process and the opportunity to obtain a County contract, to all qualified providers. The opportunity should be made available to both current County contractors and non contractors, including women-owned businesses and small owned businesses if they qualify.

11. **While you claim that the Board (of Supervisors) wants the services open to all providers, are you doing that if you require/accept only CalWORKs-specific experience?**

We are opening up services to all qualified CalWORKs providers. This is not restrictive since even current contractors must apply to be reconsidered for a contract..

12. **If the intent is to open the contracting process to improve treatment services, why limit it to providers with CalWORKs experience only? Doesn't this keep new providers with possibly better services out of the system?**

SAPC does not believe this is a limiting factor. This is a State program funded to serve a specific population- women and women with children under CalWORKs. SAPC is simply re-soliciting the services that are currently out there.

- 13. If one does not currently have a CalWORKs contract, but has served referrals in its residential program, does this qualify?**

Yes, provided the following conditions are met:

- Clients referred and served by the agency were CalWORKs participants;
- Agency has no less than four (4) years experience providing residential treatment services to this population;
- Agency meets the licensure and other minimum requirements of the RFP.

- 14. Our program has provided a step-down residential/aftercare component to CalWORKs participants for four years – with a few adjustments, we can provide all the requirements for day care habilitative. Will that work for the RFP?**

DCH must be certified by the State. Programs are free to propose any services they choose to provide, for as long as all four services are to be provided by a provider or the provider is a member of a consortium that will provide all four services.

- 15. Is an agency prohibited from employing ex-felons who have fewer than 5 years out of prison and/or fewer than 3 years off parole or probation? (page 20 of RFP)**

Proposers are discouraged by the County from employing such individuals. The cutoff is no fewer than five years out of prison and/or three years discharged from parole or probation. County has determined that this cutoff works best when employing ex-felons. Furthermore, County has the authority to conduct inquiries, background checks, and investigations if needed. The cost of background checks is the responsibility of the contractor.

- 16. Can agencies hire staff that are currently on probation or parole?**

As it applies to this RFP, staff cannot currently be on parole or probation, but must have been discharged from parole or probation for no less than three years before they can provide services.

- 17. Among the required documentation for the proposer's form of business organization are Board Minutes. Do the Board minutes have to cite a new motion? What are you looking for?**

No, the Board minutes do not have to cite a motion. SAPC needs the Board minutes to identify and confirm who has the authority to conduct business, make commitments, and enter into binding agreements with the County on the organization's behalf.

- 18. On Page 23 of the RFP, you have a requirement about Board members. Are you looking for a motion from the agency's Board of Directors?**

No, see #18 above.

- 19. Does the required Board minutes that identifies the authorized individual(s) have to reference this RFP?**

No, the minutes must provide SAPC with supportive documentation that shows the agency is operating within established procedures.

20. Referencing Exhibit IA, page AP-7 (Advisory Board), is each provider within a consortium required to establish and maintain an Advisory Board, or will the lead agency establish and maintain a single Advisory Board for the consortium as a whole?

This requirement applies to each agency that will be providing the required services under this RFP. Each one of the agencies (lead agency and consortium member-agencies) must have an Advisory Board in their respective organizations.

FINANCE

1. Given the threat to CalWORKs funding, can this RFP be postponed for a while?

There is no apparent threat to the funding for this CalWORKs RFP at this time, but the Proposal Due Date has been extended. See response to # 5.

2. How does the State budget impact CalWORKs? Is the governor still considering elimination of CalWORKs?

The State budget has been signed and it included funding support for CalWORKs as contemplated under this RFP.

3. Under the Health Care Reform Act requiring billing other health care...and all of these ind. will have selected an HMO, will services be impacted by this requirement or will these services be outside of the Health Reform requirement to bill other insurance first?

These services are outside the Health Care Reform requirement.

4. Does the 1/0 FTE Project Director have to be 100% allocated to the CalWORKs substance abuse treatment program, if other programs are co-located at the program site?

Yes, 1.0 FTE Project Director means this person should be full time in the CalWORKs substance abuse treatment program, and therefore has to be 100% allocated to the program.

5. Will the subcontracting agencies within a consortium submit billing invoices to the lead agency, or directly to the County?

Yes. The consortium's contract will be between County and the lead agency. This means it is the lead agency that represents the consortium under this contract. As such, it is responsible for submitting the consortium's billing invoices to County.

6. This concerns technicalities. The RFP spoke to the fact that someone could challenge the RFP on certain technicalities. Since this conference is being held, the assumption is that no one has challenged the RFP so far. Are there any technicality constraints on just how much you can amend the RFP based on sending out addendums? Are there any constraints on SAPC/DPH?

When addendums are issued, these addendums are first coursed through County Counsel who reviews the RFP and the addendums. If County Counsel feels too much of the RFP has been changed by the addendums, then County Counsel may recommend that the Department should start over with the RFP.

OTHERS

1. **Would you briefly describe who are the experts that SAPC plans to have on the review panel for these proposals? Where is SAPC going to find the drug and alcohol expertise that are not already involved in the proposals?**

SAPC is looking at a number of resources, to include other County departments such as DPSS, DMH whom SAPC has been working with over the years.

2. **Are you going to publish those agencies in attendance to facilitate partnerships?**

Attached is the list of agencies in attendance at the October 5th Proposers Conference, for your reference. A list of current providers is on the Board's web site at <http://file.lacounty.gov/bos/supdocs/55031.pdf>.

3. **Can we insert a table into our proposal narrative for section 2 (a) 2. Proposers Capabilities to cover services by location. Reason is, a table is a much easier and briefer way to display information requested in the narrative on page 16.**

The RFP requires a narrative so it should be written out. The proposer should be able to "sell" to the evaluators, its proposal and the organization(s) behind the proposal, so the proposal should be clearly and simply written out. Moreover, evaluators may not be able to understand and correctly interpret a chart as easily as they would a narrative. Proposers may include a table to support a narrative if it would help make the narrative easier to understand.

4. **Item 6, Project Work Plan, on page 21 instructs proposers to "include in Section E of the proposal..." but proposal sections are otherwise identified in the RFP and on the checklist, numerically. Is this an error? If not, please clarify where Section E belongs among Sections 1 through 10.**

Yes, this is an error. The Project Work Plan should be included in Section 2 of the proposal.

5. **Can a participant cross SPA lines in order to receive any of the 4 services?**

Yes. The only restriction is that CalWORKs participants must not travel more than an hour by bus from home, or no more than two (2) hours round trip. Some of our SPAs have huge geographical areas and some are more densely populated. The participant must have access to all these services.

6. **Is it possible to get the addresses of the participants who utilized medical residential detox services? It would be helpful to know which areas they are coming from, and to know what services may be repeated with them utilizing another service.**

According to SAPC's IT division, the current data collection system does not collect client addresses. What it gathers is the zip code of the facilities that reported having provided these services to CalWORKs participants.

7. **Given the need to revise and clarify aspects of the RFP requirements, will SAPC revise the deadline for submission of proposals?**

Yes. The CalWORKs RFP Proposal Due Date has been extended to Thursday, November 18, 2010, 3:00 p.m.

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